

General

Title

Pain management: median time from ED arrival to time of initial oral, intranasal or parenteral pain medication administration for ED patients with a principal diagnosis of long bone fracture.

Source(s)

Centers for Medicare and Medicaid Services (CMS). Hospital outpatient quality reporting specifications manual, version 11.0. Baltimore (MD): Centers for Medicare and Medicaid Services (CMS); Effective 2018 Jan. various p.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Process

Secondary Measure Domain

Does not apply to this measure

Brief Abstract

Description

This measure is used to assess the time (in minutes) from emergency department (ED) arrival to time of initial oral, intranasal or parenteral pain medication administration for ED patients with a principal diagnosis of long bone fracture.

Rationale

Pain management in patients with long bone fractures is undertreated in emergency departments (Ritsema et al., 2007). Emergency department pain management has room for improvement (Ritsema et al., 2007). Patients with bone fractures continue to lack administration of pain medication as part of treatment regimens (Brown et al., 2003). When performance measures are implemented for pain management of these patients administration and treatment rates for pain improve (Herr & Titler, 2009). Disparities continue to exist in the administration of pain medication for minorities (Epps, Ware, & Packard, 2008; Todd, Samaroo, & Hoffman, 1993) and children as well (Brown et al., 2003; Friedland &

Evidence for Rationale

Brown JC, Klein EJ, Lewis CW, Johnston BD, Cummings P. Emergency department analgesia for fracture pain. Ann Emerg Med. 2003 Aug;42(2):197-205. PubMed

Centers for Medicare and Medicaid Services (CMS). Hospital outpatient quality reporting specifications manual, version 11.0. Baltimore (MD): Centers for Medicare and Medicaid Services (CMS); Effective 2018 Jan. various p.

Epps CD, Ware LJ, Packard A. Ethnic wait time differences in analgesic administration in the emergency department. Pain Manag Nurs. 2008 Mar;9(1):26-32. PubMed

Friedland LR, Kulick RM. Emergency department analgesic use in pediatric trauma victims with fractures. Ann Emerg Med. 1994 Feb;23(2):203-7. PubMed

Herr K, Titler M. Acute pain assessment and pharmacological management practices for the older adult with a hip fracture: review of ED trends. J Emerg Nurs. 2009 Jul;35(4):312-20. PubMed

Ritsema TS, Kelen GD, Pronovost PJ, Pham JC. The national trend in quality of emergency department pain management for long bone fractures. Acad Emerg Med. 2007 Feb;14(2):163-9.

Todd KH, Samaroo N, Hoffman JR. Ethnicity as a risk factor for inadequate emergency department analgesia. JAMA. 1993 Mar 24-31;269(12):1537-9. PubMed

Primary Health Components

Long bone fracture; pain management; oral, intranasal, or parenteral pain medication

Denominator Description

Included populations:

Patients with a patient age on *Outpatient Encounter Date* (*Outpatient Encounter Date* $\hat{a} \in \mathcal{C}'$ *Birthdate*) greater than or equal to 2 years, and

An International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM) Principal Diagnosis Code for a (long bone) fracture (as defined in Appendix A, OP Table 9.0 of the original measure documentation), and

Patients with Pain Medication (as defined in the Data Dictionary), and

An *Evaluation and Management (E/M) Code* for emergency department (ED) encounter (as defined in Appendix A, OP Table 1.0 of the original measure documentation)

See the related "Denominator Inclusions/Exclusions" field.

Numerator Description

Continuous variable statement: Time (in minutes) from emergency department (ED) arrival to time of initial oral, intranasal or parenteral pain medication administration for ED patients with a diagnosis of a (long bone) fracture

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

Unspecified

Extent of Measure Testing

This measure is being collected by hospitals paid under the Outpatient Prospective Payment System; about 4,000 hospitals across the nation. The measure has been collected since January 1, 2012. In 2014, validity testing of critical data elements was performed on this measure for the measure period January 1, 2012 to December 31, 2012.

Evidence for Extent of Measure Testing

Larbi F. Personal communication: CMS hospital outpatient department quality measures. 2014 Jul 24.

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Emergency Department

Hospital Outpatient

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Statement of Acceptable Minimum Sample Size

Specified

Target Population Age

Age greater than or equal to 2 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

IOM Domain

Effectiveness

Timeliness

Data Collection for the Measure

Case Finding Period

Encounter dates: January 1 through December 31

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Encounter

Patient/Individual (Consumer) Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

Patients with a patient age on *Outpatient Encounter Date* (*Outpatient Encounter Date* $\hat{a} \in \mathcal{C}$ *Birthdate*) greater than or equal to 2 years, and

An International Classification of Diseases, Tenth Revision, Clinical Modification (ICD-10-CM)

Principal Diagnosis Code for a (long bone) fracture (as defined in Appendix A, OP Table 9.0 of the original measure documentation), and

Patients with Pain Medication (as defined in the Data Dictionary), and

An *Evaluation and Management (E/M) Code* for emergency department (ED) encounter (as defined in Appendix A, OP Table 1.0 of the original measure documentation)

Exclusions

Patients less than 2 years of age
Patients who expired
Patients who left the ED against medical advice or discontinued care

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

Continuous variable statement: Time (in minutes) from emergency department (ED) arrival to time of initial oral, intranasal or parenteral pain medication administration for ED patients with a diagnosis of a (long bone) fracture

Exclusions

None

Numerator Search Strategy

Data Source

Administrative clinical data

Paper medical record

Type of Health State

Does not apply to this measure

Instruments Used and/or Associated with the Measure

- An electronic data collection tool is made available from vendors or facilities can download the free CART tool. Paper tools for manual abstraction are also available for the CART tool. These tools are posted on the QualityNet Web site _______.
- Pain Management Hospital Outpatient Population Algorithm: OP-21
- Algorithm Narrative for OP-21: Pain Management Hospital Outpatient Population
- OP-21: Median Time to Pain Management for Long Bone Fracture Algorithm
- Algorithm Narrative for OP-21: Median Time to Pain Management for Long Bone Fracture

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Mean/Median

Interpretation of Score

Desired value is a lower score

Allowance for Patient or Population Factors

not defined yet

Standard of Comparison

not defined yet

Identifying Information

Original Title

OP-21: hospital outpatient pain management: median time to pain management for long bone fracture.

Measure Collection Name

Hospital Outpatient Quality Measures

Measure Set Name

Pain Management

Submitter

Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]

Developer

Centers for Medicare & Medicaid Services - Federal Government Agency [U.S.]

Funding Source(s)

United States Department of Health and Human Services

Composition of the Group that Developed the Measure

The measure was developed by the Centers for Medicare & Medicaid Services (CMS) Contractor at the time, the Oklahoma Foundation for Medical Quality Contractor. The measure continues to be maintained by CMS and its current measure maintenance contractor, Mathematica Policy Research, in conjunction with a multi-disciplinary Technical Expert Panel.

Financial Disclosures/Other Potential Conflicts of Interest

None

Measure Initiative(s)

Hospital Compare

Hospital Outpatient Quality Reporting Program

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2018 Jan

Measure Maintenance

Twice yearly

Date of Next Anticipated Revision

None

Measure Status

This is the current release of the measure.

This measure updates a previous version: Centers for Medicare and Medicaid Services (CMS). Hospital outpatient quality reporting specifications manual, version 9.0a. Baltimore (MD): Centers for Medicare and Medicaid Services (CMS); Effective 2016 Jan 1. various p.

Measure Availability

Source available from the QualityNet Web site

Check the QualityNet Web site regularly for the most recent version of the specifications manual and for the applicable dates of discharge.

NQMC Status

This NQMC summary was completed by ECRI Institute on May 7, 2014. The information was verified by the measure developer on July 3, 2014.

This NQMC summary was updated by ECRI Institute on December 22, 2015. The information was verified by the measure developer on January 28, 2016.

This NQMC summary was updated again by ECRI Institute on January 16, 2018. The information was verified by the measure developer on February 7, 2018.

Copyright Statement

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The Hospital Outpatient Quality Reporting Specifications Manual is periodically updated by the Centers for Medicare & Medicaid Services. Users of the Hospital OQR Specifications Manual must update their software and associated documentation based on the published manual production timelines.

Production

Source(s)

Centers for Medicare and Medicaid Services (CMS). Hospital outpatient quality reporting specifications manual, version 11.0. Baltimore (MD): Centers for Medicare and Medicaid Services (CMS); Effective 2018 Jan. various p.

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